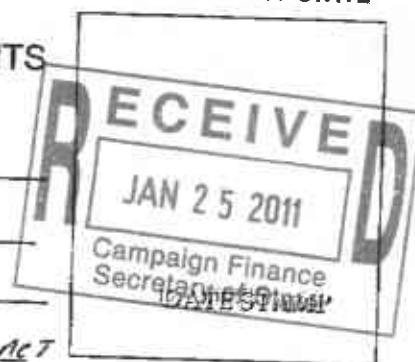


Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
Special Election

Name of Committee Casey Eure Campaign
Address 13372 Damon Ct. Biloxi, MS 39532
Telephone 228-297-2849 Fax _____
Treasurer Casey Eure Email eure@Cablecons.net



☐ Check here if above is different from previous report

TYPE OF REPORT

- ____ January 4, 2011 Pre-Election Report (January 1, 2010, through January 1, 2011).....Mandatory
X January 25, 2011 Pre-Election Report (January 2, 2010 through January 22, 2010).....Runoff Candidates
____ January 31, 2011 Annual Report (January 1, 2010 through December 31, 2010).....only
____ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation).....Mandatory
Required to terminate reporting obligations

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
(2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
(3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Non-Itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$ 7,700. ⁰⁰ + \$ 1,549. ⁰⁰	\$ 9,249. ⁰⁰	\$ 56,946. ⁰⁰
Total amount of disbursements	\$ 20,735. ⁷⁴ \$ 939. ⁴⁷	\$ 21,675. ²¹	\$ 48,406. ⁷⁸
Total amount of cash on hand	\$ 8,539. ²²	\$ 8,539. ²²	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Signature of Director or Treasurer

Date

1-25-11

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 135, Jackson, MS 39205 or fax to 801-359-1499 or 601-576-2819.
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Name of Candidate or Committee

Casey Eure Campaign

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Reporting period

1-2-11

through

1-22-11

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan☐ Other (please specify)

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
Richard Haliman JR	1/18/11	\$ 500.00
Mailing Address		
2953 Bienville Blvd 211	1/1/11	\$
City, State, Zip Code		
Ocean Springs, MS 39564	1/1/11	\$
Name of Employer (Required)		
SELF	1/1/11	\$
Occupation (Required)		
	Aggregate year-to-date	\$ 500.00

B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan☐ Other (please specify)

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
Lawrence W. Warren	1/14/11	\$ 2,000.00
Mailing Address		
PO Box 572	1/1/11	\$
City, State, Zip Code		
Hattiesburg, MS 39407	1/1/11	\$
Name of Employer (Required)		
Warren Paving	1/1/11	\$
Occupation (Required)		
owner	Aggregate year-to-date	\$ 2,000.00

C. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan☐ Other (please specify)

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
Jackie Grimes	1/12/11	\$ 1,000.00
Mailing Address		
1804 Roswell ST.	1/1/11	\$
City, State, Zip Code		
Pascagoula, MS 39581	1/1/11	\$
Name of Employer (Required)		
SELF	1/1/11	\$
Occupation (Required)		
	Aggregate year-to-date	\$ 1,000.00

D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan☒ Other (please specify) LLC

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
TSG Agency, LLC	1/19/11	\$ 1,000.00
Mailing Address		
440 Green Teal CT	1/1/11	\$
City, State, Zip Code		
Biloxi, MS 39531	1/1/11	\$
Name of Employer (Required)		
SELF	1/1/11	\$
Occupation (Required)		
	Aggregate year-to-date	\$ 2,000.00

Name of Candidate or Committee Casey Cure Campaign
 Reporting period 1-3-11 through 1-22-11

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ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan

☒ Other (please specify) LLC

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
<u>Atlas Real Estate Services LLC</u>	<u>111311</u>	<u>\$ 1,000.⁰⁰</u>
<u>13372 Damon CT</u>	<u>111</u>	<u>\$</u>
<u>Biloxi, MS 39532</u>	<u>111</u>	<u>\$</u>
City, State, Zip Code	<u>111</u>	<u>\$</u>
Name of Employer (Required)	<u>111</u>	<u>\$</u>
Occupation (Required)	Aggregate year-to-date	<u>\$ 2,000.⁰⁰</u>

B. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan

☒ Other (please specify) LLC

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
<u>L & C Investment, LLC</u>	<u>111311</u>	<u>\$ 500.⁰⁰</u>
<u>13372 Damon CT</u>	<u>111</u>	<u>\$</u>
<u>Biloxi, MS 39532</u>	<u>111</u>	<u>\$</u>
City, State, Zip Code	<u>111</u>	<u>\$</u>
Name of Employer (Required)	<u>111</u>	<u>\$</u>
Occupation (Required)	Aggregate year-to-date	<u>\$ 500.⁰⁰</u>

C. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan

☐ Other (please specify)

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
<u>David Riemann</u>	<u>111011</u>	<u>\$ 250.⁰⁰</u>
<u>11474 Stanton CIR.</u>	<u>111</u>	<u>\$</u>
<u>Gulfport, MS 39503</u>	<u>111</u>	<u>\$</u>
City, State, Zip Code	<u>111</u>	<u>\$</u>
Name of Employer (Required)	<u>111</u>	<u>\$</u>
Occupation (Required)	Aggregate year-to-date	<u>\$ 250.⁰⁰</u>

D. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan

☐ Other (please specify)

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
<u>Ben Stone</u>	<u>112111</u>	<u>\$ 500.⁰⁰</u>
<u>PO BOX 130</u>	<u>111</u>	<u>\$</u>
<u>Gulfport MS 39502</u>	<u>111</u>	<u>\$</u>
City, State, Zip Code	<u>111</u>	<u>\$</u>
Name of Employer (Required)	Aggregate year-to-date	<u>\$ 500.⁰⁰</u>
Occupation (Required)		

Name of Candidate or Committee

Casey Eure CampaignPage 3 of 4

Reporting period

1-2-11

through

1-22-11

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan☐ Other (please specify) _____

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
<u>Terry Robinson</u>	<u>1/12/11</u>	\$ <u>250.00</u>
Mailing Address <u>35 Shoreline LN</u>	<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Gulfport, MS 39503</u>	<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required) <u>SCIF</u>	<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>250.00</u>

B. Source: ☐ Corporation ☒ PAC ☐ Individual ☐ Loan☐ Other (please specify) _____

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
<u>Electric Power Associations of MS</u>	<u>1/17/11</u>	\$ <u>200.00</u>
Mailing Address <u>PO Box 3300</u>	<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Ridgeland, MS 39158</u>	<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required)	<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>450.00</u>

C. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan☒ Other (please specify) LLC

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
<u>KPR Properties, LLC</u>	<u>1/20/11</u>	\$ <u>500.00</u>
Mailing Address <u>13372 Noman CT</u>	<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Biloxi, MS 39532</u>	<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required)	<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>1500.00</u>

D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan☐ Other (please specify) _____

Full name	Date (Mo., Day, Year)	Amount of each receipt this period
	<u>1</u> <u>1</u> <u>1</u>	\$
Mailing Address	<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code	<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required)	<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required)	Aggregate year-to-date	\$

Name of Candidate or Committee

Casey Eric Campaign

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Reporting period

1- -11

through

1-2 -11

ITEMIZED DISBURSEMENTS

A. Full name		Date	Amount of each
Prime Time Agency		(Mo., Day, Year)	disbursement this period
Mailing Address			
1313 25 th Ave.		1/5/11	\$ 12,092.87
City, State, Zip Code			
Gulfport, MS 39501		1/20/11	\$ 2,655.95
Purpose of Disbursement (Optional)			
		Aggregate Year-to-date	\$ 27,692.93
B. Full name		Date	Amount of each
Winning Edge Communications		(Mo., Day, Year)	disbursement this period
Mailing Address			
305 East 16 th		1/6/11	\$ 5,636.92
City, State, Zip Code			
Anniston, AL 36207		1/1/11	\$
Purpose of Disbursement (Optional)			
		Aggregate Year-to-date	\$ 8,023.50
C. Full name		Date	Amount of each
Double K Eat		(Mo., Day, Year)	disbursement this period
Mailing Address			
		1/19/11	\$ 350.00
City, State, Zip Code			
		1/1/11	\$
Purpose of Disbursement (Optional)			
		Aggregate Year-to-date	\$ 1,200.00
D. Full name		Date	Amount of each
		(Mo., Day, Year)	disbursement this period
Mailing Address			
		1/1/11	\$
City, State, Zip Code			
		1/1/11	\$
Purpose of Disbursement (Optional)			
		Aggregate Year-to-date	\$
E. Full name		Date	Amount of each
		(Mo., Day, Year)	disbursement this period
Mailing Address			
		1/1/11	\$
City, State, Zip Code			
		1/1/11	\$
Purpose of Disbursement (Optional)			
		Aggregate Year-to-date	\$
F. Full name		Date	Amount of each
		(Mo., Day, Year)	disbursement this period
Mailing Address			
		1/1/11	\$
City, State, Zip Code			
		1/1/11	\$
Purpose of Disbursement (Optional)			
		Aggregate Year-to-date	\$